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ADAM GARDINER
Recorder, Salt Lake County, UT
GT TITLE SERVICES SLC
BY: eCASH, DEPUTY - EF 2 P.

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) GRIFFITHS & TURNER, INC. 801-327-0222
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) GRIFFITHS & TURNER, INC. 5295 S. COMMERCE DRIVE, SUITE 150 SALT LAKE CITY, UT 84107

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR				
1b. INDIVIDUAL'S SURNAME REEVES	FIRST PERSONAL NAME RENEE	ADDITIONAL NAME(S)/INITIAL(S) HEPWORTH	SUFFIX	
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME RENEE HEPWORTH REEVES REVOCABLE TRUST DATED MAY 4, 2018				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME JORDAN CREDIT UNION				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 9260 S. 300 E.	CITY SANDY	STATE UT	POSTAL CODE 84070	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

The collateral includes the following, whether now owned or hereafter acquired, whether now existing or hereafter arising, and wherever located:

- All residential solar equipment: All solar panels, optimizers, inverters, racking/attachment systems and equipment, connection hardware and wiring, metering and monitoring equipment, battery storage equipment, thermostat(s), and all accessories, attachments, tools, parts, supplies, replacements, and additions to the same (collectively, "Collateralized Goods");**
- All proceeds from warranty claims related to the Collateralized Goods, all rebates and incentives resulting from installation of the Collateralized Goods, except those which may have been assigned to the debtor's solar contractor(s) or maintenance contractor(s).**
- All of debtor's rights, title, interests or remedies under agreements relating to the Collateralized Goods, including any purchase, installation, or maintenance agreements.**

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:
 Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:
 Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licenser

8. OPTIONAL FILER REFERENCE DATA:
JCU 110054-7 REEVES

International Association of Commercial Administrators (IACA)

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME	
OR	
9b. INDIVIDUAL'S SURNAME	
REEVES	
FIRST PERSONAL NAME	
RENEE	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
HEPWORTH	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME					
OR					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
10c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME			
OR			
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

4. All consideration received from the collection, repossession, sale or other disposition of the Collateralized Goods, including amounts received from any insurer paid to compensate for loss, damage, or destruction of the Collateralized Goods.

All of the described collateral is intended to be classified as personal property. However, to the extent that all or any portion of such collateral is or becomes classified as a fixture, this filing constitutes a fixture filing. All described collateral secures a purchase money loan obligation

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

**RENEE HEPWORTH REEVES REVOCABLE TRUST DATED MAY 4, 2018
RENEE HEPWORTH REEVES, TRUSTEE
4988 S. CURRANT DRIVE
SOUTH JORDAN, UT 84009**

14. This FINANCING STATEMENT:
 covers timber to be cut covers as-extracted collateral is filed as a fixture filing

16. Description of real estate:

**ALL OF LOT 118, KENNECOTT DAYBREAK PLAT 3A,
AMENDING LOTS T4 AND V4A OF THE KENNECOTT
MASTER SUBDIVISION #1

SL COUNTY TAX ID NO. 26-24-451-022**

17. MISCELLANEOUS: